+

Approvi

PTO/SB/05 (8/05) se through 10/31/2002. OMB 0651-0032 e: U.S. DEPARTMENT OF COMMERCE

U.S. Patent and Trademar, U.S. DEPARTMENT OF COMMER.
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. 03445-P0002A

First Inventor David Martin

Title METHOD FOR IMPROVEMENT OF PROMOTION RESPONSE

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Express Mail Label No. EL 574 208 995 US

| _ | (Only for new nonprovisional a | pplications under 37 CFR 1.5 | C(U)) Expres | 3 Wan Lab | 701 140. | | -L 01 7 20 | 0 000 | - | - |
|---|---|---|---|--|---|-----------|--|-----------|--------|-----|
| | APPLICA See MPEP chapter 600 co. | ATION ELEMENTS ncerning utility patent appli | | ADDRESS | TO: | Box Pater | Commissioner nt Application on, DC 20231 | r for Pat | ents | PTO |
| 1. 2. 3. | Fee Transmitt (Submit an orioli Applicant clair See 37 CFR 1 Specification (preferred arrange - Descriptive ti - Cross Refere - Statement Re - Reference to - Background - Brief Summa - Brief Descrip - Detailed Des | al Form (e.g., PTO/SB/nal. and a duolicate for fee ms small entity status 1.27. [Total Page ement set forth below] itle of the Invention ences to Related Applice egarding Fed sponsore of Microfiche Appendix of the Invention ary of the Invention of the Drawings (if | WashIngton, DC 20231 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Annendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b.: Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS | | | | | | | |
| | 5-7 | Abstract of the Disclosure ` | | | 9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of Attorney | | | | | |
| 4. 5. | Oath or Declaration | 5 USC 113) Total Sh Total Pa | | 11. 12. | English Translation Document (if applicable) Information Disclosure Copies of I Statement (IDS)/PTO-1449 Citations | | | | | IDS |
| | b. Copy for coi i. DE Sig | executed (original or continuation/divisional with Box ELETION OF INVENTO gned statement attached de | 13. | Preliminary Amendment Return Receipt Postcard (MPEP 503) (Should be specifically itemized) Certified Copy of Priority Document(s) (if foreign priority is claimed) | | | | | | |
| 6. | 1. | named in the prior application, s 63(d)(2) and 1.33(b). hta Sheet. See 37 CFR | | 16. | Other | | | | | |
| 17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part of prior application No.: Prior application information: Examiner Group/Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 18. CORRESPONDENCE ADDRESS | | | | | | | | | | |
| X | Customer Number of E | 126 Suppose the Correspondence address below Attach har cords label here) | | | | | | | | |
| Na | ame | Stephen P. McN | | | | | | | | |
| Address St. Onge Steward Johnston & 986 Bedford Street | | | | Reens LLC | | | | | | |
| City Stamford | | State | СТ | Zip Co | de | 0690 | 5-5619 | | | |
| | ountry | United States | Telephone | 203 324 | ــــــــــــــــــــــــــــــــــــــ | | Fax | | 327-10 | |
| <u>`</u> | Name (Print/Type) | Stephen P. McN | Registration No. (Attorney/Agent) 32,745 | | | | | | | |
| İ | Signature | | anara | | | | Date | 11/3 | /00 | 1 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Times will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Office, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OF COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

A

App for use through 10/31/2002. OMB 0651-0032 Patent and Trader. Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision

L AMOUNT OF PAYMENT (\$) 422.0

| | Complete if Known | | | | | | | |
|---|------------------------|------------------|--|--|--|--|--|--|
| | Application No. | | | | | | | |
| | Filing Date | November 3, 2000 | | | | | | |
| | First Named Inventor | David Martin | | | | | | |
| | Examiner Name | | | | | | | |
| | Group Art Unit | | | | | | | |
| _ | Attorney Docket Number | 03445-P0002A SPM | | | | | | |

| TOTAL AMOUNT OF PAYMENT (\$) 422.0 | | | | | | Attorney Docket Number 03445-P0002A SPIVI | | | | | | | | |
|---|---|--|------------------------|-----------------|----------------------|---|------------|---|---|---|-----------|------|--|--|
| METHOD OF PAYMENT (check one) | | | | | | FEE CALCULATION (continued) | | | | | | | | |
| The Commissioner is hereby authorized to charge | | | | | 3. ADDITIONAL FEES | | | | | | | | | |
| · · 🖂 | indicated food and credit any over navment to: | | | Large | Entity | Small | Entity | | | | | | | |
| Deposit | | | | Fee | Fee | Fee | Fee | | | | Fee Paid | | | |
| Account Number | | | 1 | Code 105 | (\$) 130 | Code 205 | (\$) 65 | Surchargo - I | Fee Description ate filing for or or | | | | | |
| Deposit | | | | | 103 | 130 | 203 | 05 | Suicharge – a | ate ming for or c | oau i | | | |
| Account Name | e St.Onge Steward Johnston & Reens LLC | | | 127 | 50 | 227 | 25 | Surcharge – la cover sheet | rge – late provisional filing or heet | | | | | |
| ⊠ Char | | | | 139 | 130 | 139 | 130 | Non-English s | pecification | | | | | |
| | Applicant claims small entity status. See 37 CFR 1.27 | | | | 147 | 2,520 | 147 | 2,520 | - | equest for ex p | | | | |
| | | | | | | | | | tion Requesting pu | | | | | |
| _ | _ | | | | 112 | 920* | 112 | 920* | Examiner acti | | | | | |
| Che | Check Money Other Order FEE CALCULATION | | | Other | 113 | 1,840* | 113 | 1,840 | Requesting pu Examiner Acti | questing publication of SIR after aminer Action | | | | |
| i d | | | | 115 | 110 | 215 | 55 | Extension for | reply within first | | | | | |
| . BASIC | BASIC FILING FEE | | | 116 | 390 | 216 | 195 | Extension for | reply within sec | | | | | |
| | | | | 117 | 890 | 217 | 445 | Extension for | reply within third | d month | | | | |
| Fee Fee Code (\$) | Fee Code | Fee (\$) | Fee Description | Fee Paid | 118 | 1,390 | 218 | 695 | Extension for | reply within four | th month | | | |
| 101 710 | | | Utility filing fee | 355.00 | 128 | 1,890 | 228 | 945 | Extension for | reply within fifth | month | | | |
| ± 106 320 | 20 206 160 Design filing fee | | | 119 | 310 | 219 | 155 | Notice of App | eal | | | | | |
| 107 490 | | | | 120 | 310 | 220 | 155 | • | a brief in support of an appeal | | | | | |
| 108 780 | 208 | 355 F | | | 121 | 270 | 221 | 135 | Request for or | • • | | | | |
| 114 150 | • | | J | | 138 | 1,510 | 138 | 1,510 | | • | | | | |
| 1 | | | | 255.00 | | | | | | itute a public us | , | | | |
| | SUBTOTAL (1) (\$) 355.00 | | | 140 | 110 | 240 | 55 | | ive – unavoidab | | | | | |
| 2. EXTRA | EXTRA CLAIMS FEES | | | | 141 | 1,240 | 241 | 620 | Petition to rev | ive – unintentio | nal . | | | |
| 1 | Extra Fee from Claims Below Fe | | | Fee Paid | 142 | 1,240 | 242 | 620 | Utility issue fe | e (or reissue) | | | | |
| Total Claims | | | 27.00 | 143 | 440 | 243 | 220 | Design issue t | fee | | | | | |
| Independent Claims | dependent 4 3 = 4 | x 40 = | 40.00 | 144 | 600 | 244 | 300 | Plant issue fe | е | | | | | |
| Multiple Depe | ــــــــا | | x 0 = | 0.00 | 122 | 130 | 122 | 130 | Petitions to the | e Commissione | | | | |
| Large Entir | arge Entity Small Entity ee Fee Fee Fee Fee Descript | | | 126 | 240 | 126 | 240 | Submission of | f Informational I | | | | | |
| | | | ion | 581 | 40 | 581 | 40 | | ch patent assignes number of pro | | | | | |
| 103 18 | 203 | • | Claims in excess of 20 | | 146 | 710 | 246 | 355 | | ssion after final | rejection | | | |
| | 80 202 40 Independent claims in excess of 3 | | | 140 | 740 | 240 | 355 | | (37(CFR § 1.129(a)) For each additional invention to be | | | | | |
| 104 270 | | 204 135 Multiple dependent claims, if not paid | | · · | 149 | 710 | 249 | 333 | Examined (37 | เบมช | | | | |
| 108 80 | over original patent 10 18 210 9 ** Reissue claims in excess of 20 | | 179 | 710 | 279 | 355 | • | Request for Continued Examination (RCE) | | | | | | |
| 110 18 | | | | 169 | 900 | 169 | 900 | Request for ex | uest for expedited examination | | | | | |
| and over original patent ** or number previously paid, if greater; For Reissues, see above | | | Other fee (specify) | | | | | ppication | | | | | | |
| | | | | | | | | | | | 2.00 | | | |
| SUBTOTAL (2) (\$) 67.00 | | | | | | * Reduced by Basic Filing Fee paid SUBTOTAL (3) (\$) 0. | | | | | | | | |
| SUBMITTE | SUBMITTED BY St.Onge Steward Johnston & Reens LLC | | | | | C Complete (if applicable | | | | | | | | |
| Name (Print Type) Stephen P. McNamara | | | | | | etion No. ey/Agent) | 32,74 | 32,745 203.32 | | | -6155 | | | |
| Signature | Signature | | | | (money), gond | | | | | <i>Telephone</i> Date | 11/3/2000 | | | |
| - Jigilatai C | | | <u> </u> | ~ ~~ | | | | | | Date | 11/3/2 | .000 | | |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORM TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.